## CITY OF CHATTANOOGA APPLICATION FOR BUSINESS TAX LICENSE

## **ANSWER ALL QUESTIONS COMPLETELY AND REMIT PROPER PAYMENT DUE**

**Incomplete Applications Will Be Returned To You** 

\* \* \* READ CAREFULLY \* \* \*

CITY OF CHATTANOOGA CITY TREASURER'S OFFICE City Hall, Suite 102 101 E. 11th Street Chattanooga, TN 37402-4284		FOR DE	ed:	USE ONLY
		Date Written:		
		License No.:		
(423) 757-5195		Classification	:	
1. Exact Business Name and Location	2. Business Mail	2. Business Mailing Address		
Name (Give trade name at this location)	Name (Give trade na	Name (Give trade name at this location)		
Street, Highway (Do not use P.O. Box)	Street, Highway	_		
City State Zip	City	City State Zip		
3. Business Phone Number (Include Area Code)	4. Federal Emplo	yers I.D. No.		Applied For
( )				Not Required
5. State Sales Tax Number  Applied Fo		of Business A	At This Loca	tion
	•			
☐ Corporation - Enter date of Name of Corporation:	incorporation or domestication	on in Tennessee:		
8. Identify Owners, Officers and/or Partners (Attach Addit (1) Name	Home Phone No.	ne No.'s and Socia	•	
(1) Name	nome Phone No.		Social Secur	ily No.
Home Address (Not P.O. Box) Street Address	City		State	Zip
(2) Name	Home Phone No.		Social Secur	ity No.
Home Address (Not P.O. Box) Street Address	City		State	Zip
(3) Name	Home Phone No.		Social Securi	ity No.
Home Address (Not P.O. Box) Street Address	City		State	Zip
9. Describe the exact business activity at this location,	stating the major prod	lucts and/or s	ervices sold	<b>!:</b>
Is the business: Retail Wholesale Both Ma	anufacturer 🔲 Amusement	☐ Service	Percent Percent	% Wholesale Retail
10. Using the BUSINESS ACTIVITY CODE listing on the b of this application, enter the code number that best scribes your type of business operation.	Chattanooga No Yes - How ma	ate more than and Tenness any additional loc n Additional Name	ee?	_
12. Have you ever had a City of Chattanooga Business  Tax License prior to now?  Yes  No  If Yes, Give the Name and Address of Your Last Business  Name:	☐ Starting a ne ☐ Change in co ☐ Change in th ness. Enter t	<ul> <li>13. REASON FOR FILING THIS APPLICATION</li> <li>□ Starting a new business</li> <li>□ Change in corporate structure</li> <li>□ Change in the ownership of, or the purchase of an existing business. Enter the name and City License Number of the business you are purchasing.</li> </ul>		
Address: Zip:	Name:	Name: License No.:		
14. This application must be received within 20 days from co	mmencement date of bus	iness or penal	ty and interes	t apply ★
★ Minimum Fee  ★ Penalty — (5% for each 30 days or fraction thereof in the lateract (10.05%) are consistent delignment data with the second of the s	not to exceed 25%)		\$	
<ul> <li>★ Interest (12.25% per annum from delinquent date ur</li> <li>★ Recording Fee</li> </ul>		-	•	
★ Total payment due, MAKE CHECK IN THIS AMOUI				
15. THE STATEMENTS MADE IN THIS APPLICATION AF (This application must be signed by the individual/owner, or	RE TRUE TO THE BEST	OF MY KNO	WLEDGE AN	
By:	Print Signature)	Title	<del></del> -	Date

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JEWELRY STORES

KEY & LOCK SHOPS
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LARO MAD SERVICE MAINTENANCE
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MACHINE SHOPS
MALL MAINTEN
MALL MAINTEN
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